



# Child and Adolescent Well Care Visits (WCV)

## HEDIS® Measurement Year 2020 & 2021 Measures

**Measure Description: The percentage of members 3–21 years of age who had at least one comprehensive well-care visit with a PCP or an OB/GYN practitioner during the measurement year.**

\*Preventive services may be rendered on visits other than well-child visits. Well-child preventive services count toward the measure, regardless of the primary intent of the visit eg: Gyn type visit, but services that are specific to an acute or chronic condition do not count toward the measure.

Visits to school-based clinics with practitioners whom the organization would consider PCPs may be counted if documentation that a well-care exam occurred is available in the administrative system in the time frame specified by the measure. The PCP does not have to be assigned to the member.\*

**\*Pertinent change from calendar year 2019 to 2020: Medical record submission will no longer close gaps in care for well-child HEDIS measures. Care must be captured administratively.**

**\*\*Telehealth visits now meet criteria as long as the appropriate CPT code is submitted with the GT modifier.**

### Eligible Population

Members 3–21 years as of December 31 of the measurement year.

### Components of a Well-Child Visit

The well-child visit must occur with a PCP type practitioner, but the PCP does not have to be the practitioner assigned to the child. Preventive services may be rendered on visits other than well-child visits. Well-child preventive services count toward the measure, regardless of the primary intent of the visit, but services that are specific to an acute or chronic condition do not count toward the measure. Do not include services rendered during an inpatient or ED visit.

The following are some examples of acceptable criteria for all the components in a well-child visit:

- **Health History** (Applies to all children and adolescents from ages 3-21)
  - Past illness (or lack of illness)
  - Past surgeries/hospitalizations (or lack of surgery or hospitalization)
  - Social history
  - Family health history
  - Allergies/medications/immunizations documented together
- **Physical Developmental History, Ages 3-6** (Physical skills seen in children as they grow and develop)
  - Can skip
  - Hops on one foot
  - Runs and climbs well
  - Can ride a tricycle
  - Has good articulation/language skills
  - Can count to 10
  - Names 4 or more colors

## Quality Measure Toolkit

[AetnaBetterHealth.com/Pennsylvania](https://www.aetna.com/better-health/pennsylvania)

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Aetna Better Health® of Pennsylvania  
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- **Physical Developmental History, Ages 7-11**  
(Physical skills seen in children as they grow and develop)
  - Puberty onset
  - Initiation of growth spurts
  - Menstruation/ejaculation
  - Loss of baby fat
  - Accretion of muscle
- **Physical Developmental History, Ages 12-21**  
(Assessment of whether the adolescent is developing skills to become a healthy adult)
  - Tanner Stage/Scale
  - Growth spurts/acne/puberty onset
  - Breast development/menstruation
  - Participation in sports/school activities
  - Facial or pubic hair
- **Mental Developmental History, Ages 3-6**
  - Education/learning (alphabet and numbers)
  - Understands and responds to commands
  - Competent with fork and spoon
  - Imaginative play
- **Mental Developmental History, Ages 7-11**
  - Gaining independence
  - Temper problems
  - Conflict resolution
  - Understanding of rule and consequences
- **Mental Developmental History, Ages 12-21**
  - Education/learning/readiness for school or current grade
  - Depression or suicide awareness
  - Relationships
  - Smoking/ETOH/drug use
  - Sexual activity/puberty
- **Physical Exam** (Applies to all children and adolescents from ages 3-21)
  - Comprehensive head to toe exam with vital signs and assessment of at least 3 body systems
- **Anticipatory Guidance, Ages 3-6** (Regarding anticipation of emerging issues that a child and family may face)

- Nutrition
- Exercise
- Substance abuse counseling
- Safety
- Notation that age appropriate anticipatory guidance was provided
- **Anticipatory Guidance, Ages 7-11** (Regarding anticipation of emerging issues that a child and family may face)
  - Nutrition
  - Exercise
  - Oral health care & wear mouth guard during sports
  - Safety
  - Use of booster seat
  - Social determinants of health
  - Notation that age appropriate anticipatory guidance was provided
- **Anticipatory Guidance, Ages 12-21** (Regarding anticipation of emerging issues that a child and family may face)
  - Nutrition
  - Exercise
  - Substance abuse counseling
  - Safety
  - Notation that age appropriate anticipatory guidance was provided

## Numerator Codes

There is a large list of approved NCQA codes used to identify the services included in the WCV measure.

**The following are just a few of the approved codes. For a complete list please refer to the NCQA website at [NCQA.org](http://NCQA.org).**

Code Class	Codes	Description
CPT	99381-99385, 99391-99395, 99461	Well-care
ICD-10	Z00.121	Encounter for routine child health check with abnormal findings
ICD-10	Z00.129	Encounter for routine child health check without abnormal findings
ICD-10	Z00.2	Encounter for examination for period of rapid growth in childhood